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 \*\* CONTINUING DATA \*\*\*\*\* 

 \*\* FOREIGN APPLICATIONS \*\*\*\*\* 

 IF REQUIRED, FOREIGN FILING LICENSE  
 GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR  COUNTRY NY	SHEETS  DRAWING 2	TOTAL  CLAIMS 22	INDEPENDENT  CLAIMS 3
Examiner's Signature	Initials				

## ADDRESS

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